### Case 17-82033 Doc 1 Filed 08/29/17 Entered 08/29/17 10:32:13 Desc Main Document Page 1 of 56

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Jose First name  L. Middle name  Avila Last name and Suffix (Sr., Jr., II, III)	Maria First name  Middle name  Avila Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4249	xxx-xx-5552

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Debtor 1 Jose L. Avila Debtor 2 Maria Avila

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	■ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	824 Johnson Court Belvidere, IL 61008  Number, Street, City, State & ZIP Code  Boone County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code	If Debtor 2 lives at a different address:  408 Spruce Drive Belvidere, IL 61008  Number, Street, City, State & ZIP Code  Boone  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

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	otor 2	Maria Avila				Case	number (if known)
D		Tall the Occurs About 1	/ DI				
7.	The c	Tell the Court About \ chapter of the	Check one	e. (For a	brief description of each, see N		C. § 342(b) for Individuals Filing for Bankruptcy
		Bankruptcy Code you are choosing to file under		0)). Also	, go to the top of page 1 and ch	eck the appropriate box.	
	oncosing to me under	■ Chapte	er 7				
			☐ Chapte	er 11			
			☐ Chapte	er 12			
			☐ Chapte	er 13			
8.	How	you will pay the fee	abo orde	ut how yeer. If you	ou may pay. Typically, if you are	e paying the fee yourself,	the clerk's office in your local court for more details you may pay with cash, cashier's check, or money ir attorney may pay with a credit card or check with
					y the fee in installments. If you ee in Installments (Official Form		and attach the Application for Individuals to Pay
			☐ I red	quest that is not red	at my fee be waived (You may quired to, waive your fee, and m	request this option only ay do so only if your inco	f you are filing for Chapter 7. By law, a judge may, me is less than 150% of the official poverty line that
							Iments). If you choose this option, you must fill out rm 103B) and file it with your petition.
9.	Have you filed for bankruptcy within the	■ No.					
		last 8 years?	☐ Yes.				
				District		When	Case number
				District		When	Case number
				District		When	Case number
10.		ny bankruptcy s pending or being	■ No				
	filed not fi you,	by a spouse who is ling this case with or by a business er, or by an	☐ Yes.				
				Debtor			Relationship to you
				District		When	Case number, if known
				Debtor			Relationship to you
				District		When	Case number, if known
11.		ou rent your ence?	□ No.	Go to	line 12.		
	16210	ence :	Yes.	Has y	our landlord obtained an eviction	n judgment against you a	and do you want to stay in your residence?
					No. Go to line 12.		
					Yes. Fill out Initial Statement	About an Eviction Judgm	ent Against You (Form 101A) and file it with this

bankruptcy petition.

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	otor 1 Jose L. Avila otor 2 Maria Avila		Docum	Case number (if known)
Par	Report About Any Bu	sinesses	You Own as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	te & ZIP Code
	it to this petition.			ox to describe your business:
			<del>_</del>	ness (as defined in 11 U.S.C. § 101(27A))
			<b>–</b>	Estate (as defined in 11 U.S.C. § 101(51B))
				lefined in 11 U.S.C. § 101(53A))
				er (as defined in 11 U.S.C. § 101(6))
			■ None of the abov	е
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	s. If you indicate that you are	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	■ No.	I am not filing under Cha	oter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	Hazardous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat	☐ Yes.		
	of imminent and identifiable hazard to		What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	0 · · · · · · · · ·			Number, Street, City, State & Zip Code

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Debtor 1 Jose L. Avila

Debtor 2 Maria Avila Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filled for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-82033 Doc 1 Filed 08/29/17 Entered 08/29/17 10:32:13 Desc Main Document Page 6 of 56

	tor 1 Jose L. Avila tor 2 Maria Avila		Dodamon	Case number	(if known)			
Part		tions for Re	eporting Purposes		· · · · · · · · · · · · · · · · · · ·			
	What kind of debts do you have?	16a.			ned in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			■ Yes. Go to line 17.					
		16b.		ess debts? Business debts are debts to nt or through the operation of the busin				
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe th	nat are not consumer debts or business	s debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	o to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.		u estimate that after any exempt prope le to distribute to unsecured creditors?	erty is excluded and administrative expenses			
	administrative expenses are paid that funds will		■ No					
	be available for distribution to unsecured creditors?	i	Yes					
18.	How many Creditors do	<b>1</b> -49		□ 1,000-5,000	<b>2</b> 5,001-50,000			
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000 ☐ 40,004,05,000	50,001-100,000			
		☐ 100-19 ☐ 200-9		☐ 10,001-25,000	☐ More than100,000			
19.	How much do you estimate your assets to	<b>\$</b> \$0 - \$1	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	be worth?		01 - \$100,000 001 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion			
			001 - \$300,000 001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
20.	How much do you estimate your liabilities	□ \$0 - \$		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	to be?		01 - \$100,000 001 - \$500.000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion			
		□ \$500,001 - \$1 million		□ \$100,000,001 - \$500 million	☐ More than \$50 billion			
Part	7: Sign Below							
For	you	I have ex	amined this petition, and I declare	under penalty of perjury that the inform	nation provided is true and correct.			
				n aware that I may proceed, if eligible, available under each chapter, and I ch	under Chapter 7, 11,12, or 13 of title 11, cose to proceed under Chapter 7.			
				ay or agree to pay someone who is not ice required by 11 U.S.C. § 342(b).	an attorney to help me fill out this			
		I request	relief in accordance with the chapte	er of title 11, United States Code, spec	ified in this petition.			
			cy case can result in fines up to \$25		r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		/s/ Jose	L. Avila	/s/ Maria Avila				
		Jose L. Signature	e of Debtor 1	<b>Maria Avila</b> Signature of Debtor	2			
		Executed	August 29, 2017 MM / DD / YYYY	Executed on Aug	gust 29, 2017 / DD / YYYY			

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Debtor 1	Jose L. Avila	Document	Page 7 of 56		
Debtor 2	Maria Avila		C	ase number (if known)	
For your a	ttorney, if you are ed by one	I, the attorney for the debtor(s) named in this under Chapter 7, 11, 12, or 13 of title 11, Unit for which the person is eligible. I also certify	ed States Code, and have	e explained the relief a	vailable under each chapter
•	not represented by y, you do not need page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.			
		/s/ Charles T. Sewell	Date	August 29, 201	7
		Signature of Attorney for Debtor	<del></del>	MM / DD / YYYY	

charlests1@aol.com

Email address

Charles T. Sewell

Charles T. Sewell, P.C.
Firm name
215 S. State Street
Belvidere, IL 61008
Number, Street, City, State & ZIP Code

Contact phone **815-544-3118** 

Printed name

**2554984**Bar number & State

		1700:11111	<u> </u>		
Fill in this infor	mation to identify your	case:			
Debtor 1	Jose L. Avila				
	First Name	Middle Name	Last Name		
Debtor 2	Maria Avila				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number				_	
(if known)					Check if this is an amended filing

### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	9,200.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	9,200.00
Pai	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	150,388.00
	Your total liabilities	\$	150,388.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,344.70
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,408.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		

the court with your other schedules.

Official Form 106Sum

Summary of Yo

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

		Document	nt	Page 9 of 56	
	Jose L. Avila			· ·	
Debtor 2	Maria Avila			Case number (if known)	

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$1,648.76
--	------------

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

			Document	Page 10 of 56		
Fill in	this inform	ation to identify your	case and this filing:			
Debto	r 1	Jose L. Avila				
		First Name	Middle Name	Last Name		
Debto	r 2	Maria Avila				
(Spouse	e, if filing)	First Name	Middle Name	Last Name		
United	d States Ban	kruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS		
Case	number					☐ Check if this is an
						amended filing
Offi,	oial Ear	m 106A/B				
_						
Scł	nedule	e A/B: Prop	erty			12/15
think it informa	fits best. Be ation. If more r every quest	as complete and accura space is needed, attach ion.	e items. List an asset only once. It te as possible. If two married peop a separate sheet to this form. On t g, Land, or Other Real Estate You C	ole are filing together, both are the top of any additional page	e equally responsible for s	upplying correct
rait i.	Describe L	don residence, Bunding	, Lund, or Other Real Estate Tou C	will of flave all interest in		
1. <b>Do</b> y	ou own or ha	ave any legal or equitable	e interest in any residence, buildin	g, land, or similar property?		
■ N	lo. Go to Part	2.				
ПΥ	es. Where is	the property?				
		and proporty:				
Part 2:	Describe Y	our Vehicles				
3. <b>Ca</b> r □ N <b>■</b> Y	lo	cks, tractors, sport ut	ility vehicles, motorcycles			
3.1	Make: <b>F</b>	ord	Who has an interest in t	the property? Check one	Do not deduct secured of	claims or exemptions. Put
5.1		ruck		ne property: Check one		red claims on Schedule D: nims Secured by Property.
	- IVIOGOI.	998	Debtor 1 only		Creditors Wild Have Cia	
	Approximate		Debtor 2 only  Debtor 1 and Debtor 2	) anh	Current value of the entire property?	Current value of the portion you own?
	Other information		At least one of the del	• •	chare property.	portion you own.
1	paid off tr		At least one of the del	nois and another		
	paid on ti	uon	☐ Check if this is com	nunity property	\$1,200.00	\$1,200.00
			(see instructions)			
Example 1 Part 3:	mples: Boats lo 'es  d the dollar ges you hav	s, trailers, motors, person value of the portion ye attached for Part 2.	TVs and other recreational velonal watercraft, fishing vessels, so you own for all of your entries. Write that number hereehold Items able interest in any of the folloogenerates.	snowmobiles, motorcycle ac	cessories entries for	\$1,200.00  Current value of the portion you own?
						Do not deduct secured
						claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

Official Form 106A/B Schedule A/B: Property

Case 17-82033 Doc 1 Filed 08/29/17 Entered 08/29/17 10:32:13 Desc Main Document Page 11 of 56 Debtor 1 Jose L. Avila Debtor 2 Maria Avila Case number (if known) Yes. Describe..... \$2,500.00 Livingroom, bedroom, kitchen, diningroom furniture 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... \$2,500.00 H-TV 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment □ No Yes. Describe..... \$500.00 45 Pistol 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$300.00 Everyday clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses

■ No

☐ Yes. Describe.....

14. Any other personal and household items you did not already list, including any health aids you did not list

■ No

☐ Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....

\$5,800.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

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		Jose L. Avi Maria Avila			Document	rage 12 (	Case number	(if known)	
	_								not deduct secured
								Ciaiii	ns or exemptions.
ı	■ No		·		•	•	hand when you file y	our petition	
L	→ Yes								
	Example				accounts; certificates unts with the same in		es in credit unions, br h.	okerage houses, ar	nd other similar
_	□ No ■ Yes				Institution	name:			
			17.1.	checking	Alpine E	3ank			\$100.00
			17.2.	Checking	Alpine E	Bank			\$400.00
_			s, investme		brokerage firms, me	oney market accc	ounts		
	☐ Yes			Institution or issu	ıer name:				
19.	Non-pub joint ver		stock and	nterests in inco	orporated and unin	corporated busi	nesses, including a	n interest in an LL	C, partnership, and
	No								
L	JYes. G	live specific ir		about them ne of entity:			% of ownersh	nip:	
_	Negotial	ole instrument	ts include p	ersonal checks,	egotiable and non- cashiers' checks, pr t transfer to someon	romissory notes, a	and money orders.		
	☐ Yes. Gi	ive specific in		about them er name:					
_		ent or pensio es: Interests in			x), 403(b), thrift savir	ngs accounts, or o	other pension or profi	t-sharing plans	
I	Yes. Lis	st each accou		ely. of account:	Institution	ı name:			
			401K		North C	enter			\$1,700.00
_	Your sha Example		ed deposit	s you have made	, ,		use from a company), telecommunication		ners
	■ No □ Yes				Institution	name or individu	ıal:		
23.	Annuitie	s (A contract	for a period	lic payment of m	oney to you, either f	or life or for a nur	mber of years)		
ı	No	,	·				- ,		
	☐ Yes	I	ssuer nam	e and descriptior	1.				
2	26 U.S.C.			an account in and 529(b)(1).	a qualified ABLE p	rogram, or unde	er a qualified state tu	uition program.	
	■ No	ı	nstitution n	ame and descrin	otion. Separately file	the records of an	nv interests 11 U.S.C.	8 521(c)·	

Case 17-82033 Filed 08/29/17 Entered 08/29/17 10:32:13 Document Page 13 of 56 Debtor 1 Jose L. Avila Case number (if known) Debtor 2 Maria Avila 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No The Yes, Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No

Doc 1

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Give specific information..

Desc Main

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Debtor 1	Jose L. Avila	differit 1 age 14 of	30	
Debtor 2	Maria Avila		Case number (if known)	
	the dollar value of all of your entries from Part Part 4. Write that number here			\$2,200.00
Part 5: D	escribe Any Business-Related Property You Own or H	ave an Interest In. List any real est	ate in Part 1.	
37. <b>Do you</b>	own or have any legal or equitable interest in any bu	siness-related property?		
■ No. G	So to Part 6.			
☐ Yes.	Go to line 38.			
	escribe Any Farm- and Commercial Fishing-Related P you own or have an interest in farmland, list it in Part 1.	roperty You Own or Have an Intere	st In.	
46. <b>Do yo</b>	ou own or have any legal or equitable interest in	any farm- or commercial fishing	ng-related property?	
■ No	o. Go to Part 7.			
☐ Ye	s. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest	in That You Did Not List Above		
Exam	ou have other property of any kind you did not a apples: Season tickets, country club membership	Iready list?		
■ No □ Yes	. Give specific information			
54. <b>Add</b>	the dollar value of all of your entries from Part	7. Write that number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. <b>Part</b>	1: Total real estate, line 2			\$0.00
56. <b>Part</b>	2: Total vehicles, line 5	\$1,200.00		
57. <b>Part</b>	3: Total personal and household items, line 15	\$5,800.00		
58. <b>Part</b>	4: Total financial assets, line 36	\$2,200.00		
59. <b>Part</b>	5: Total business-related property, line 45	\$0.00		
60. <b>Part</b>	6: Total farm- and fishing-related property, line	52 \$0.00		
61. <b>Part</b>	7: Total other property not listed, line 54	+\$0.00		
62. <b>Tota</b>	l personal property. Add lines 56 through 61	\$9,200.00	Copy personal property total	\$9,200.00
63. <b>Tota</b>	Il of all property on Schedule A/B. Add line 55 +	line 62		\$9,200.00

Official Form 106A/B Schedule A/B: Property page 5

		1700.0000			
Fill in this infor	mation to identify your	case:			
Debtor 1	Jose L. Avila				
	First Name	Middle Name	Last Name		
Debtor 2	Maria Avila				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				_	Check if this is an amended filing

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
1998 Ford Truck 140000 miles paid off truck	\$1,200.00		\$1,200.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
Livingroom, bedroom, kitchen, diningroom furniture	\$2,500.00		\$2,500.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
H-TV Line from Schedule A/B: 7.1	\$2,500.00		\$2,500.00	735 ILCS 5/12-1001(b)
Ellie Holli Golloddio 702.			100% of fair market value, up to any applicable statutory limit	
45 Pistol Line from Schedule A/B: 10.1	\$500.00		\$500.00	735 ILCS 5/12-1001(b)
Ellio Holli Garedale 745.			100% of fair market value, up to any applicable statutory limit	
Everyday clothing Line from Schedule A/B: 11.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
EING HOITI GONGGUIG AVD. 1111			100% of fair market value, up to any applicable statutory limit	

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Maria Avila Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Specific laws that allow exemption Amount of the exemption you claim Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B checking: Alpine Bank 735 ILCS 5/12-1001(b) \$100.00 \$100.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit **Checking: Alpine Bank** 735 ILCS 5/12-1001(b) \$400.00 \$400.00 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit 401K: North Center 735 ILCS 5/12-1006 \$1,700.00 \$1,700.00 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No 

Debtor 1

Yes

Fill in this infor				
Debtor 1	Jose L. Avila			
	First Name	Middle Name	Last Name	
Debtor 2	Maria Avila			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this amended filing

#### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

	0430 17 02000 1	Document	Page 1	8 of 56	.10 Desc Main
Fill in th	nis information to identify your		1 1 1 1 1 1 1 1		
Debtor 1	Jose L. Avila				
	First Name	Middle Name	Last Name		
Debtor 2	mana / ma				
(Spouse if,	filing) First Name	Middle Name	Last Name		
United S	States Bankruptcy Court for the:	NORTHERN DISTRICT OF ILI	LINOIS		
Case nu	mber				
(if known)					☐ Check if this is an
					amended filing
Officia	I Form 106E/F				
	dule E/F: Creditors W	ho Have Unsecured	Claims		12/15
				Part 2 for araditors with NON	PRIORITY claims. List the other party to
eft. Attac	h the Continuation Page to this pag case number (if known). —	e. If you have no information to re			number the entries in the boxes on the op of any additional pages, write your
1. Do a	ny creditors have priority unsecure	d claims against you?			
■ N	o. Go to Part 2.				
□ Y	es.				
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims			
□ N ■ Y		art. Submit this form to the court with			
unse	one creditor holds a particular claim, li	/ for each claim. For each claim listed	l, identify what t	type of claim it is. Do not list cla	aims already included in Part 1. If more
					Total claim
4.1	Atg Credit Llc	Last 4 digits of acc	ount number	5915	\$583.00
	Nonpriority Creditor's Name	When wee the debt	in a compani O	Opened 04/42	_
	1700 W Cortland St Ste 2	When was the debt	incurrear	Opened 01/13	
	Chicago, IL 60622				
	Number Street City State ZIp Code	As of the date you	file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.  Debtor 1 only	П.			
	_	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed	UTV	d alaim.	
	At least one of the debtors and and		arr unsecure	u Cidiiii.	
	☐ Check if this claim is for a comr		a out of a seco	ration agreement or divorce th	eat you did not
	Is the claim subject to offset?	report as priority clai		nanon agreement or divorce th	iat you ulu flot
	■ No	☐ Debts to pension	or profit-sharin	g plans, and other similar debt	ts
		_	Collection	Attorney Radiology Co	onsultants
	☐ Yes	Other. Specify	Of Pockf	,	

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Debt	or 2 Maria Avila	Case number (if know)	
4.2	Atg Credit LIc  Nonpriority Creditor's Name	Last 4 digits of account number 2618	\$352.00
	1700 W Cortland St Ste 2	When was the debt incurred? Opened 06/13	
	Chicago, IL 60622  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Collection Attorney Radiology Consultants Of Rockf	
4.3	Atg Credit Llc Nonpriority Creditor's Name	Last 4 digits of account number 9109	\$67.00
	1700 W Cortland St Ste 2	When was the debt incurred? Opened 03/16	
	Chicago, IL 60622		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Пол	
	■ Debtor 2 only	☐ Contingent	
		☐ Unliquidated ☐ Disputed	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection Attorney Radiology Consultants Of Rockf	
4.4	Atg Credit Llc Nonpriority Creditor's Name	Last 4 digits of account number 3507	\$49.00
	1700 W Cortland St Ste 2	When was the debt incurred? Opened 01/11	
	Chicago, IL 60622		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Collection Attorney Radiology Consultants Other. Specify Of Rockf	

Debtor 1 Jose L. Avila

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Debtor 1 Jose L. Avila Debtor 2 Maria Avila Case number (if know) 4.5 **Chase Card** Last 4 digits of account number 0019 \$3,468.00 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 06/06 Last Active 7/12/17 Po Box 15298 When was the debt incurred? Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.6 **Convergent Heathcare Recovery** Last 4 digits of account number 1552 \$729.00 Nonpriority Creditor's Name 121 Ne Jefferson St When was the debt incurred? Opened 8/23/13 Suite 100 Peoria, IL 61602 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Cbo Osf ☐ Yes 4.7 **Convergent Heathcare Recovery** \$314.00 Last 4 digits of account number 1551 Nonpriority Creditor's Name 121 Ne Jefferson St When was the debt incurred? Opened 8/23/13 Suite 100 Peoria, IL 61602 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No ☐ Yes ■ Other. Specify Cbo Osf

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2 Maria Avila		Case number (if know)	
Convergent Heathcare Recovery  Nonpriority Creditor's Name	Last 4 digits of account number	5950	\$202.00
121 Ne Jefferson St Suite 100	When was the debt incurred?	Opened 10/31/13	
Peoria, IL 61602 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	Other. Specify Cbo Osf		
Convergent Heathcare Recovery	Last 4 digits of account number	6337	\$60.00
Nonpriority Creditor's Name 121 Ne Jefferson St	When was the debt incurred?	Opened 5/21/12	
Suite 100			
Peoria, IL 61602  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•		
Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Cbo Osf		
Convergent Heathcare Recovery	Last 4 digits of account number	4936	\$58.00
Nonpriority Creditor's Name	_		
121 Ne Jefferson St Suite 100	When was the debt incurred?	Opened 1/29/12	
Peoria, IL 61602 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	•		
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
□Yes	■ Other. Specify Cbo Osf		

Debtor 1 Jose L. Avila

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Debtor Debtor	1 Jose L. Avila 2 Maria Avila		Case number (if know)	
4.1 1	Convergent Heathcare Recovery	Last 4 digits of account number	9486	\$50.00
	Nonpriority Creditor's Name 121 Ne Jefferson St Suite 100 Peoria, IL 61602	When was the debt incurred?	Opened 6/10/13	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Cbo Cv		
4.1	Delta Dental	Last 4 digits of account number		\$0.00
	Nonpriority Creditor's Name P.O. Box 828	When was the debt incurred?		
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes	Other. Specify Dental Bill		
4.1	Frontier Communication	Last 4 digits of account number	8120	\$146.00
	Nonpriority Creditor's Name  19 John St Middletown, NY 10940	When was the debt incurred?	Opened 11/12 Last Active 7/23/13	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	No	Debts to pension or profit-sharing		
	☐ Yes	■ Other Specify Agriculture		

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Debt Debt	or 1 Jose L. Avila or 2 Maria Avila		Case number (if know)	
4.1 4	Frontier Communication  Nonpriority Creditor's Name	Last 4 digits of account number	9130	\$34.00
	19 John St	When was the debt incurred?	Opened 08/13	
	Middletown, NY 10940  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam's	S. Offeck all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Agriculture	)	
4.1 5	Mutual Mgmt	Last 4 digits of account number	2248	\$413.00
	Nonpriority Creditor's Name 401 E State Rockford, IL 61104	When was the debt incurred?	Opened 12/12/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical Pa	yment Data	
4.1 6	Mutual Mgmt	Last 4 digits of account number	8686	\$351.00
	Nonpriority Creditor's Name 401 E State Rockford, IL 61104	When was the debt incurred?	Opened 2/24/16	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	<del>-</del> '	
	☐ Yes	■ Other. Specify Medical Pa	yment Data	

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Debtor 1 Jose L. Avila Debtor 2 Maria Avila Case number (if know) 4.1 **Rockford Mercantile** 0757 \$681.00 Last 4 digits of account number Nonpriority Creditor's Name 2502 S. Alpine Rd When was the debt incurred? Opened 8/26/13 Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other, Specify Osf St Anthony Medical Ctr 4.1 **Rockford Mercantile** 0756 \$295.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 2502 S. Alpine Rd Opened 7/17/13 When was the debt incurred? Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Rockford Assoc Pathologists ☐ Yes 4.1 **Rockford Mercantile** 0755 \$169.00 Last 4 digits of account number 9 Nonpriority Creditor's Name 2502 S. Alpine Rd When was the debt incurred? Opened 1/08/13 Rockford, IL 61108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Rockford Assoc Pathologists ☐ Yes

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Debtor 2	Jose L. A Maria Av			Case r	number (if kno	ow)	
4.2	Rockford N	Mercantile	Last 4 digits of account number	6355	5		\$105.00
	Nonpriority Cre 2502 S. Alp	oine Rd	When was the debt incurred?	Opei	ned 8/03/1	<u> </u>	
	Rockford, Number Street	IL 61108 City State Zlp Code	As of the date you file, the claim	is: Chec	k all that annly	1	
		the debt? Check one.	As of the date you me, the dam	is. Offico	k ali tilat apply	,	
	Debtor 1 or	nly	☐ Contingent				
	■ Debtor 2 or	nlv	☐ Unliquidated				
		nd Debtor 2 only	☐ Disputed				
		e of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
	_	nis claim is for a community	☐ Student loans				
	debt	ils claim is for a community	☐ Obligations arising out of a sep	aration ad	areement or di	ivorce that you did not	
	Is the claim s	ubject to offset?	report as priority claims	aration as	groomont or a	ivoroo triat you did riot	
	■ No		Debts to pension or profit-shari	ng plans,	and other sim	nilar debts	
	☐ Yes		Other. Specify Crusader	Clinic 2	2		
4.2	Tcf Bankin	g & Savings	Last 4 digits of account number	8001			\$142,262.00
	Nonpriority Cre	-	Last 4 digits of account number		·	_	<b>VIII,202.00</b>
	801 Marque	ette Ave is, MN 55402	When was the debt incurred?	Oper 3/24/		Last Active	
	-	t City State ZIp Code	As of the date you file, the claim	is: Chec	k all that apply	/	
	Who incurred	the debt? Check one.					
	Debtor 1 or	nly	☐ Contingent				
	Debtor 2 or	nly	☐ Unliquidated				
	■ Debtor 1 ar	nd Debtor 2 only	☐ Disputed				
	☐ At least one	e of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
	☐ Check if th	nis claim is for a community	☐ Student loans				
	debt	-	Obligations arising out of a sep	aration aç	greement or di	ivorce that you did not	
	_	ubject to offset?	report as priority claims				
	No		Debts to pension or profit-shari			nilar debts	
	☐ Yes		Other. Specify Real Estat	e Spec	ific		
Part 3:	List Other	rs to Be Notified About a Debt	That You Already Listed				
is tryin have m notified	ng to collect from the	om you for a debt you owe to som creditor for any of the debts that y s in Parts 1 or 2, do not fill out or	. 0	n Parts 1	or 2, then lis	t the collection agency	here. Similarly, if you
Part 4:		Amounts for Each Type of Uns					
	he amounts of f unsecured cl		s. This information is for statistical	reporting	g purposes or	nly. 28 U.S.C. §159. Add	the amounts for each
		<b>-</b>				Total Claim	
	6a. otal iims	Domestic support obligations		6a.	\$	0.00	
from Pa		Taxes and certain other debts	ou owe the government	6b.	\$	0.00	
	6c.	Claims for death or personal in	jury while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority unser	cured claims. Write that amount here.	6d.	\$	0.00	
	6e.	. Total Priority. Add lines 6a throu	gh 6d.	6e.	\$	0.00	
	6f.	Student loans		6f.	\$	Total Claim 0.00	
Т	otal			٠	Ψ	0.00	
cla from Pa	iims art 2 6g.	Obligations arising out of a sep	paration agreement or divorce that	6g.	\$	0.00	

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Debtor 1 Debtor 2 Maria Avila Case number (if know)

| Vou did not report as priority claims | Debts to pension or profit-sharing plans, and other similar debts | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | 150,388.00 | | 150,388.00 |

Official Form 106 E/F

		DUGUILE	111 FAUE / / ULSO	
Fill in this infor	mation to identify your	case:		
Debtor 1	Jose L. Avila			
	First Name	Middle Name	Last Name	
Debtor 2	Maria Avila			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

#### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1		·	•		
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Otate	Zii Code	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4			<u> </u>		
	Name				<u> </u>
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.5	- ity		Oldio	211 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	_

		Docume	nt Page 28 d	of 56
Fill in this	information to identify your	case:		
Debtor 1	Jose L. Avila			
<b>D</b> 1 / 0	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing	Maria Avila First Name	Middle Name	Last Name	
	ites Bankruptcy Court for the:	NORTHERN DISTRICT		
Officed Sta	ites bankruptcy Court for the.	NORTHERN DIOTRIOT	OI ILLIIVOIO	
Case num (if known)	ber			☐ Check if this is an amended filing
	l Form 106H Iule H: Your Cod	ebtors		12/15
people are fill it out, a	filing together, both are equ	ally responsible for supp boxes on the left. Attach	lying correct informat the Additional Page to	as complete and accurate as possible. If two married tion. If more space is needed, copy the Additional Pag to this page. On the top of any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case, o	do not list either spouse	e as a codebtor.
■ No				
☐ Yes	3			
	<b>hin the last 8 years, have you</b> ia, California, Idaho, Louisiana			ry? (Community property states and territories include nington, and Wisconsin.)
	Go to line 3. s. Did your spouse, former spo	use, or legal equivalent live	with you at the time?	
in line Form	2 again as a codebtor only	f that person is a guarant	or or cosigner. Make	r if your spouse is filing with you. List the person show sure you have listed the creditor on Schedule D (Offic 06G). Use Schedule D, Schedule E/F, or Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and Z	P Code		Column 2: The creditor to whom you owe the deb Check all schedules that apply:
3.1				☐ Schedule D. line
	Name			☐ Schedule E/F, line
				☐ Schedule G, line
	Number Street City	State	ZIP Code	_
3.2	Name			Schedule D, line
	IVALITO			☐ Schedule E/F, line
_	Number Ctreet			
	Number Street	State	ZIP Code	

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Fill	in this information to ider	ntify your ca	ise:							
Del	btor 1 Jos	se L. Avila	1			_				
1	btor 2 Ma	ria Avila				_				
Uni	ited States Bankruptcy C	ourt for the:	NORTHERN DISTRIC	CT OF ILLINOIS						
	se number nown)			-			□ A		ed filing ent showing	g postpetition chapter
$\sim$	fficial Form 10	.cı					1	3 income	as of the fo	ollowing date:
	fficial Form 10						N	MM / DD/ Y	YYYY	
	chedule I: You as complete and accura									12/1
spo atta	plying correct informat use. If you are separate ch a separate sheet to the table.  Describe Em	ed and you this form. (	r spouse is not filing wi	ith you, do not includ	e infor	mati	on abou	t your spo	ouse. If mo	ore space is needed,
1.	Fill in your employme information.	ent		Debtor 1				Debtor 2	2 or non-fil	ling spouse
	If you have more than		Employment status	■ Employed				☐ Emple	oyed	
	attach a separate page information about addit		Linployment status	☐ Not employed				■ Not e	mployed	
	employers.		Occupation							
	Include part-time, seas self-employed work.	sonal, or	Employer's name	North Central Sta	affing					
	Occupation may includ or homemaker, if it app		Employer's address	7675 Walton Stre Rockford, IL 611						
			How long employed t	here?						
Pai	rt 2: Give Details	About Mon	thly Income							
	mate monthly income a		ate you file this form. If	you have nothing to re	port for	any	line, write	e \$0 in the	space. Inc	lude your non-filing
•	ou or your non-filing spou e space, attach a separa			ombine the information	for all e	empl	oyers for	that perso	on on the lir	nes below. If you need
							For Del	btor 1		otor 2 or ng spouse
2.			ry, and commissions (b calculate what the monthl		2.	\$	1	,999.96	\$	45.38
3.	Estimate and list mor	nthly overti	me pay.		3.	+\$		5.98	+\$	0.00

2,005.94

\$

45.38

Calculate gross Income. Add line 2 + line 3.

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Debi	tor 1 tor 2	Jose L. Avila Maria Avila	_		Cas	e number ( <i>if k</i>	nowi	7) -					
					Fo	or Debtor 1				r Debtor n-filing s			
	Cop	by line 4 here	4.		\$	2,00	5.9	4	\$		•	5.38	
5.	List	all payroll deductions:											
	5a.	Tax, Medicare, and Social Security deductions	5a	a.	\$	46	4.5	8	\$			0.00	
	5b.	Mandatory contributions for retirement plans	5b	٥.	\$		0.18	_	\$			0.00	
	5c.	Voluntary contributions for retirement plans	50	<b>)</b> .	\$		0.0	_	\$			0.00	
	5d.	Required repayments of retirement fund loans	50	d.	\$		0.0	0	\$			0.00	
	5e.	Insurance	5e	€.	\$	1	0.8	6	\$			0.00	
	5f.	Domestic support obligations	5f.		\$		0.0	0	\$_			0.00	
	5g.	Union dues	50	j.	\$		0.0	0	\$			0.00	
	5h.	Other deductions. Specify:	5h	1.+	\$		0.0	<u>0</u> +	- \$_			0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	53	5.6	2	\$			0.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,47	0.3	2	\$		4	5.38	
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$		0.0	_	\$			0.00	
	8b.	Interest and dividends	8b		Φ_ \$		0.0		\$_			0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			Ψ_ \$		0.0	_	\$_ \$			0.00	
	8d.	Unemployment compensation	80		\$		0.0		\$_			0.00	
	8e.	Social Security	86		\$		0.0	_	\$_			9.00	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: Food Stamps Pension or retirement income	e 8f. 8g		\$_ \$_		0.0	_	\$_ \$_			0.00 0.00	
	8h.	Other monthly income. Specify:	_		\$		0.0		· -			0.00	
	011.		_ "	 	Ψ_		0.0	<u> </u>	,—			0.00	7
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$		0.0	D	\$_		8	29.00	
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$		1,470.32	1.	\$		874.38	=	\$	2,344.70
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		1,470.02	1 ]	Ψ_		07 4.00		Ψ	2,044.70
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your per friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depe							Schedule 11.		\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certallies								12.	\$		2,344.70
										,		mbin	
13.	Do :	you expect an increase or decrease within the year after you file this form No.	?								m	onthly	income
		Yes. Explain:											

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						1				
Fill	in this informa	tion to identify yo	our case:							
Deb	tor 1	Jose L. Avila	ì			Cł	neck if this			
Dob	tor 2	Maria Avila						ended filing	wing postpetition chap	tor
	ouse, if filing)	Maria Avila							the following date:	lei
Unite	ed States Bankr	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / E	D / YYYY		
Case	e number									
	nown)									
Of	fficial Fo	rm 106J								
		J: Your I	Evnor	1606						12/1
Be a	as complete a ormation. If m nber (if know	and accurate as ore space is ne n). Answer ever	s possible. eded, atta ry question	If two married people ar					or supplying correct	
Part 1.	Is this a joir	ibe Your House	hold							
	□ No. Go to									
		s Debtor 2 live i	in a separ	ate household?						
	□N		-							
	<b>■</b> Y	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of D	ebtor 2.			
2.	Do you have	e dependents?	■ No							
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation		De <sub>l</sub>	pendent's	Does dependent live with you?	
	Do not state	the							□ No	
	dependents	names.							☐ Yes	
									□ No □ Yes	
									□ No	
									☐ Yes	
									□ No	
3.	Do vour ext	enses include	_	NI-					☐ Yes	
٠.	expenses of	f people other tl	han $_{m \Box}$	No Yes						
	yourself and	d your depende	nts?	163						
exp	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp						
• • •		a naid far with r	non ooch	government escietance i	f vou know					
the		h assistance an		government assistance it sluded it on Schedule I: Y				Your exp	enses	
4.	The rental o	or home owners	hin exnen	ses for your residence. I	nclude first mortgage	_				
	payments ar	nd any rent for the	e ground o	r lot.	noidae mat mortgagi	4.	\$		250.00	
	If not includ	led in line 4:								
		estate taxes				4a.			0.00	
		rty, homeowner's				4b. 4c.			0.00	
		maintenance, re owner's associat		upkeep expenses dominium dues		4c. 4d.	· —		0.00 0.00	
5.				our residence, such as ho	me equity loans		\$		0.00	

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Deh	tor 1 Jose L. Avila			
	tor 2 Maria Avila	Case num	nber (if known)	
_				
6.	Utilities: 6a. Electricity, heat, natural gas	6a.	¢	0.00
	6b. Water, sewer, garbage collection	6b.		0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.		35.00
	6d. Other. Specify:	6d.	· -	0.00
7.	Food and housekeeping supplies	7.		200.00
8.	Childcare and children's education costs	8.	·	0.00
9.	Clothing, laundry, and dry cleaning	9.		60.00
-	Personal care products and services	10.		50.00
11.		11.		20.00
	<b>Transportation.</b> Include gas, maintenance, bus or train fare.			
	Do not include car payments.	12.	·	200.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
14.	Charitable contributions and religious donations	14.	\$	20.00
15.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.	45-	•	0.00
	15a. Life insurance	15a.		0.00
	15b. Health insurance	15b.	·	0.00
	15c. Vehicle insurance	15c.	· .	50.00
4.0	15d. Other insurance. Specify:	15d.	<b>&gt;</b>	0.00
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	•	0.00
17	Installment or lease payments:		Ψ	0.00
17.	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	*	0.00
	17c. Other. Specify:	17c.		0.00
	17d. Other. Specify:	17d.		0.00
18.	Your payments of alimony, maintenance, and support that you did not report a	as	·	
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I)		\$	0.00
19.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on Sci			0.00
	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.	·	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues	20d. 20e.	·	0.00
04			· <u> </u>	0.00
21.	Other: Specify: Tools for work	21.	+\$	20.00
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	955.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	<u>)</u>	\$	1,453.00
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	2,408.00
			<u> </u>	
23.	Calculate your monthly net income.	00-	<b>c</b>	0.044.70
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	2,344.70
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	2,408.00
	23c. Subtract your monthly expenses from your monthly income.			
	The result is your <i>monthly net income</i> .	23c.	\$	-63.30
24.		you file this	s form?	
	For example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage?			ease or decrease because of a
	No.			
	Yes. Explain here:			

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Debtor 1 Debtor 2		L. Avila a Avila				Case num	ber (if known)	
Fill in this	s informa	tion to identify yo	our case:					
Debtor 1		Jose L. Avila				Check	if this is:	
D-h4 0							n amended filing	g postpetition chapter 13
Debtor 2 (Spouse,	if filing)	Maria Avila					xpenses as of the following	
United Sta	ates Bankı	ruptcy Court for the	NORTH	HERN DISTRICT OF ILLIN	OIS	N	IM / DD / YYYY	
Case num (If known)								
Offic	ial Fo	rm 106J-	2					
				enses for Sepa				
Debtor 2 form on space is	2 have on ly with re s needed every qu	ne or more depe espect to expen , attach anothe	endents in ses for De sheet to	sehold expenses ONLY In common, list the dependence of the tare not report this form. On the top of a	dents on both Scl ted on Schedule J	nedule J ai l. Be as co	nd this form. Answ emplete and accurat	rer the questions on this te as possible. If more
1. <b>Do</b> □ ■		<b>Debtor 1 maint</b> Do not complete		ate households?				
2. <b>Do</b>	you hav	e dependents?	□ No					
list dep reg liste of D	all other endents ardless o	ebtor 1 but of Debtor 2 f whether ependent on	■ Yes.	Fill out this information for each dependent	Dependent's rela Debtor 2	tionship to	Dependent's age	Does dependent live with you?
	not state							□ No
aep	endents	names.			Son		31	Yes
•								□ No □ Yes
								□ No
								☐ Yes
•								□ No □ Yes
exp	enses o	penses include f people other t d your depende	han $_{oxdotsim}$	No Yes				
Part 2:	Estim	ate Your Ongoi	ng Month	ly Expenses				
	e your ex		our bankr	uptcy filing date unless y	ou are using this	form as a	supplement in a Cha	apter 13 case to report
Include	expense	s paid for with	non-cash	government assistance in Schedule I: Your Incon			Your expenses	
		or home owners		nses for your residence. In or lot.	nclude first mortgaç	ge 4.	\$	500.00
lf n	ot includ	led in line 4:						
4a.	Real e	estate taxes				4a.	\$	15.00
4b. 4c.		rty, homeowner's	-	's insurance upkeep expenses		4b. 4c.	*	0.00
40.	00		., unu t	-p50p 0//p0/1000		40.	<b>–</b>	0.00

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	tor 1 otor 2	Jose L. Maria Av		Case num		
	<b>1</b> el	Llows	orlo consistion as condominium dura-	لد ۵	¢	0.00
E	4d.		ner's association or condominium dues	4d. 5.	·	0.00
5.	Addi	itional mon	tgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilit	ties:				
	6a.	Electricity	, heat, natural gas	6a.	\$	260.00
	6b.	Water, se	wer, garbage collection	6b.	\$	0.00
	6c.	Telephone	e, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
	6d.	Other. Sp	ecify:	6d.	\$	0.00
7.	Food	d and hous	ekeeping supplies		\$	350.00
8.			children's education costs	8.	\$	50.00
9.	Cloth	hing, laund	lry, and dry cleaning	9.	\$	0.00
		•	products and services	10.	\$	0.00
		-	ntal expenses	11.	·	0.00
			Include gas, maintenance, bus or train fare.		T	<del></del>
			ar payments.	12.	\$	0.00
13.			clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
			ributions and religious donations	14.	\$	50.00
15.	Insu	rance.	-			
	Do n	ot include ir	nsurance deducted from your pay or included in lines 4 or 20.			
	15a.	Life insura	ance	15a.	\$	0.00
	15b.	Health ins	surance	15b.	\$	0.00
	15c.	Vehicle in	surance	15c.	\$	0.00
	15d.	Other insu	urance. Specify: Mobile Home Insurance	15d.	\$	28.00
16.	Taxe	s. Do not ir	nclude taxes deducted from your pay or included in lines 4 or 20.		-	
	Spec	cify:	, , ,	16.	\$	0.00
17.			ease payments:			
	17a.	Car paym	ents for Vehicle 1	17a.	\$	0.00
	17b.	Car paym	ents for Vehicle 2	17b.	\$	0.00
		Other. Sp		17c.	\$	0.00
18.			of alimony, maintenance, and support that you did not report as			0.00
			your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	0.00
19.			s you make to support others who do not live with you.		\$	0.00
	Spec			19.	_	
20.			erty expenses not included in lines 4 or 5 of this form or on Sched			2.22
			s on other property	20a.		0.00
		Real estat		20b.	·	0.00
			homeowner's, or renter's insurance	20c.	·	0.00
			nce, repair, and upkeep expenses	20d.	·	0.00
			er's association or condominium dues	20e.	·	0.00
21.	Othe	er: Specify:		21.	_+\$	0.00
22.	Your	r monthly e	expenses. Add lines 5 through 21.		\$	1,453.00
			monthly expenses of Debtor 2. Copy the result to line 22b of Schedule	J to	•	1,100.00
			al expenses for Debtor 1 and Debtor 2.			
00			th's form			•
		not used or		. (11 - 41 -		
24.			an increase or decrease in your expenses within the year after you ou expect to finish paying for your car loan within the year or do you expect your r			page or decrease because of a
			ou expect to finish paying for your car loan within the year or do you expect your raterins of your mortgage?	nortgage	payını <del>c</del> ını ıo incre	case of decrease because of a
	■ N		tomo or your mongago.			
			Frankin kana.			
	$\square$ Y	es.	Explain here:			

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Fill in this in	formation to identify your	case:				
Debtor 1	Jose L. Avila					
	First Name	Middle Name	Last	Name		
Debtor 2	Maria Avila					
(Spouse if, filing)	First Name	Middle Name	Last	Name		
United States	s Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	S		
Case numbe	r					_ 0
(if known)						Check if this is an amended filing
f two marrie You must file obtaining mo years, or bot		r, both are equally responder, both are equally respondering to be bankruptcy schedules a connection with a bank	nsible for su	upplying corre	ect information. Making a false stat	tement, concealing property, or 00, or imprisonment for up to 20
	Sign Below					
Did you	ı pay or agree to pay some	one who is NOT an attor	rney to help	you fill out ba	ankruptcy forms?	
■ No						
☐ Ye	es. Name of person					akruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
	enalty of perjury, I declare y are true and correct.	that I have read the sum	ımary and so	chedules filed	l with this declarati	on and
X Isl.	Jose L. Avila		Х	/s/ Maria Av	vila	
	se L. Avila			Maria Avila		
Sign	nature of Debtor 1			Signature of [	Debtor 2	
Date	August 29, 2017			Date Augu	ıst 29, 2017	

Fill	in this infor	mation to identify you	r case:			
Deb	tor 1	Jose L. Avila				
		First Name	Middle Name	Last Name		
	tor 2 use if, filing)	Maria Avila First Name	Middle Name	Last Name		
Linit	ad States Ba	ankruptcy Court for the:	NORTHERN DISTRICT (	OF ILLINOIS		
Office	eu States Da	inkruptcy Court for the.	NORTHERN DISTRICT	OI ILLINOIS		
Cas (if kn	e number _					Check if this is an mended filing
		orm 107 of Financial	Affairs for Indivi	duals Filing for B	ankruptcy	4/16
infoi num	mation. If n	nore space is needed, n). Answer every ques	attach a separate sheet to stion.	this form. On the top of an	equally responsible for sup y additional pages, write you	
Par	Give	Details About Your Ma	rital Status and Where You	ı Lived Before		
1.	What is you	r current marital statu	is?			
	■ Married □ Not ma	-				
2.	During the	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Li	st all of the places you li	ived in the last 3 years. Do n	ot include where you live nov	ı.	
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
<b>3.</b> state					ity property state or territory ico, Texas, Washington and W	
	■ No					
	☐ Yes. M	ake sure you fill out Sch	nedule H: Your Codebtors (O	fficial Form 106H).		
Par	Expla	in the Sources of You	r Income			
4.	Fill in the tot	al amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including parter together, list it only once u		ndar years?
	□ No					
	_	Il in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	last calenda nuary 1 to D	ar year: ecember 31, 2016 )	■ Wages, commissions, bonuses, tips	\$25,132.00	■ Wages, commissions, bonuses, tips	\$12,768.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Jose L. Avila Debtor 1 Debtor 2 Maria Avila Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For the calendar year before that: \$24,714.00 \$6,741.00 Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$0.00 \$3,395.00 For the calendar year: ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2014) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income Gross income from Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? □ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Amount you Dates of payment **Total amount** Was this payment for ... still owe paid

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	otor 1 otor 2	Jose L. Avila Maria Avila	Document 1	Cas	e number (if known)		
7.	Inside of whi	n 1 year before you filed for bankrupters include your relatives; any general pach you are an officer, director, person in iness you operate as a sole proprietor. 1 my.	artners; relatives of any gen control, or owner of 20% o	eral partners; partner r more of their voting	erships of which yo g securities; and ar	u are a genera ny managing a	al partner; corporations gent, including one for
		No Yes. List all payments to an insider.					
		ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	inside	n 1 year before you filed for bankrupter? le payments on debts guaranteed or cos		ments or transfer a	ny property on a	ccount of a de	ebt that benefited an
		No Yes. List all payments to an insider					
		ler's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Par	t 4:	Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	List al modifi	n 1 year before you filed for bankrupt I such matters, including personal injury ications, and contract disputes. No Yes. Fill in the details.					
	Case	e title e number	Nature of the case	Court or agency		Status of th	e case
	Jose Mari TCF	eclosure e L. Avila ia Avila National Bank S-CH-1	Foreclosure on Mortgage	Boone County 601 North Main Belvidere, IL 61	Street	■ Pending □ On appe □ Conclud	al
10.	Check	n 1 year before you filed for bankrupt call that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	shed, attached	d, seized, or levied?
	Cred	itor Name and Address	Describe the Property		Date		Value of the property
			Explain what happened				
11.	accou	n 90 days before you filed for bankrup unts or refuse to make a payment bed No Yes. Fill in the details.		uding a bank or fir	nancial institution	ı, set off any a	mounts from your
	Cred	itor Name and Address	Describe the action the	creditor took	Date taken	action was	Amount
12.	court	n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a No Yes		erty in the possessi	ion of an assigne	e for the bene	efit of creditors, a

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	otor 1 Jose L. Avila otor 2 Maria Avila				Case number (	if known)		
Par	t 5: List Certain Gifts and Contributio	ns						
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No  ■ Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$6 per person		Describe the gift	S		Dates you gave the gifts	Value	
	Person to Whom You Gave the Gift and Address:	d						
14.	Within 2 years before you filed for bank  ■ No □ Yes. Fill in the details for each gift or			ts or contribution	s with a total	value of more tha	n \$600 to any charity?	
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo	total	Describe what yo	ou contributed		Dates you contributed	Value	
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankry or gambling?  No Yes. Fill in the details.	uptcy or	since you filed for	bankruptcy, did y	ou lose anyth	ning because of the	eft, fire, other disaster	
	Describe the property you lost and how the loss occurred	Include	be any insurance of the amount that ins ce claims on line 33	urance has paid. L	ist pending	Date of your loss	Value of property lost	
	t 7: List Certain Payments or Transfer							
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition	preparin	g a bankruptcy pe	tition?				
	■ No □ Yes. Fill in the details.							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and transferred	value of any propo	erty	Date payment or transfer was made	Amount of payment	
17.	Within 1 year before you filed for bankri promised to help you deal with your cre Do not include any payment or transfer that No	editors or	to make payment			r transfer any prop	erty to anyone who	
	Yes. Fill in the details.  Person Who Was Paid		Description and	value of any prope	ortic	Data navmant	Amount of	
	Address		transferred	value of any propo	erty	Date payment or transfer was made	payment	
18.	Within 2 years before you filed for bank transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have all No	<b>ur busin</b> ers made a	ess or financial aff as security (such as	airs? the granting of a se				
	Yes. Fill in the details.							
	Person Who Received Transfer Address		Description and property transfer			iny property or received or debts change	Date transfer was made	
	Person's relationship to you							

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Debtor 1 Jose L. Avila
Debtor 2 Maria Avila Case number (if known)

19.	beneficiary? (These are often called asset-pro		y property to a	a seir-settie	a trust or similar device	or which you are a
	☐ Yes. Fill in the details.  Name of trust	Description and v	alue of the pro	operty trans	sferred	Date Transfer was made
Par	18: List of Certain Financial Accounts, In	struments, Safe Deposit	Boxes, and S	torage Unit	s	
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, ohouses, pension funds, cooperatives, asso	or other financial accour	nts; certificate	s of deposi		, ,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	bankruptcy, a	ıny safe der	oosit box or other depo	sitory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it?  Address (Number, Street, City, State and ZIP Code)		Describe	the contents	Do you still have it?
22.	Have you stored property in a storage unit o ■ No	or place other than your	home within 1	l year befor	re you filed for bankrup	ccy?
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?
Par	9: Identify Property You Hold or Control	for Someone Else				
23.	Do you hold or control any property that so for someone.	meone else owns? Inclu	ude any prope	rty you borr	rowed from, are storing	for, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value
Par	10: Give Details About Environmental Inf	ormation				
For	he purpose of Part 10, the following definiti	ons apply:				
	Environmental law means any federal, state toxic substances, wastes, or material into t regulations controlling the cleanup of these	he air, land, soil, surface	e water, groun	0.	,	
	Site means any location, facility, or propert to own, operate, or utilize it, including dispose	•	environmental	law, wheth	er you now own, operat	e, or utilize it or used
	Hazardous material means anything an env hazardous material, pollutant, contaminant		as a hazardou:	s waste, ha	zardous substance, tox	ic substance,
Rep	ort all notices, releases, and proceedings th	at you know about, rega	rdless of whe	n they occu	ırred.	

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Debtor 1 Jose L. Avila Debtor 2 Maria Avila

Case number (if known)

24.	24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
		Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	ıd	Environmental law, if you know it	Date of notice		
25.	Hav	re you notified any governmental unit of a	any release of hazardous material?					
		No Yes. Fill in the details.						
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	ıd	Environmental law, if you know it	Date of notice		
26.	Hav	e you been a party in any judicial or adm	inistrative proceeding under any envi	iron	mental law? Include settlements a	and orders.		
		No Yes. Fill in the details.						
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case		
Par	t 11:	Give Details About Your Business or C	Connections to Any Business					
27.	Wit	hin 4 years before you filed for bankrupto	cy, did you own a business or have an	ny o	f the following connections to any	/ business?		
		☐ A sole proprietor or self-employed in	trade, profession, or other activity, either full-time or part-time					
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
		☐ A partner in a partnership						
		☐ An officer, director, or managing exe	cutive of a corporation					
		☐ An owner of at least 5% of the voting	or equity securities of a corporation					
		No. None of the above applies. Go to P	art 12.					
		Yes. Check all that apply above and fill	in the details below for each business	s.				
		siness Name	Describe the nature of the business		Employer Identification number			
	Address (Number, Street, City, State and ZIP Code)		Name of accountant or bookkeeper	Do not include Social me of accountant or bookkeeper Dates business existe		number or ITIN.		
28.		hin 2 years before you filed for bankrupto itutions, creditors, or other parties.	ey, did you give a financial statement t	to a	nyone about your business? Inclu	ude all financial		
		No Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)							

Case 17-82033 Doc 1 Filed 08/29/17 Entered 08/29/17 10:32:13 Desc Main Document Page 42 of 56 Jose L. Avila Debtor 1 Debtor 2 Maria Avila Case number (if known) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Jose L. Avila /s/ Maria Avila Jose L. Avila Maria Avila Signature of Debtor 1 Signature of Debtor 2 Date August 29, 2017 August 29, 2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

■ No □ Yes

■ No

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Fill in this inform	ill in this information to identify your case:						
Debtor 1	Jose L. Avila						
	First Name	Middle Name	Last Name				
Debtor 2	Maria Avila						
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS				
Case number				☐ Check if this is an amended filing			

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□No
name:	☐ Retain the property and redeem it.	
Description of property	<ul><li>□ Retain the property and enter into a Reaffirmation Agreement.</li><li>□ Retain the property and [explain]:</li></ul>	☐ Yes
securing debt:	— Ketain the property and [explain].	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	_
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Debtor 2	Jose L. Avila Maria Avila	Case number (if known)	
name:		☐ Retain the property and redeem it.	☐ Yes
		Retain the property and enter into a	_ 100
Descrip		Reaffirmation Agreement.	
property securin		☐ Retain the property and [explain]:	
	<del></del>		-
Part 2:	List Your Unexpired Personal Property L	eases u listed in Schedule G: Executory Contracts and Unexpired	LL cocce (Official Form 106C) fill
in the info	rmation below. Do not list real estate lea	ses. Unexpired leases are leases that are still in effect; the ease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property leases		Will the lease be assumed?
Lessor's n			□ No
Property:	n of leased		☐ Yes
Lessor's n	name:		□ No
Description Property:	n of leased		☐ Yes
Lessor's n	omo:		
	name. on of leased		□ No
Property:			☐ Yes
Lessor's n			□ No
Property:	n of leased		□ Yes
Lessor's n			□ No
Description Property:	on of leased		☐ Yes
Lessor's n	name: on of leased		□ No
Property:			☐ Yes
Lessor's n			□ No
Property:	n of leased		☐ Yes
Part 3:	Sign Below		
	nalty of perjury, I declare that I have indic hat is subject to an unexpired lease.	ated my intention about any property of my estate that sec	ures a debt and any personal
	ose L. Avila	χ /s/ Maria Avila	
	e L. Avila	Maria Avila	
	ature of Debtor 1	Signature of Debtor 2	
Date	August 29, 2017	Date <b>August 29, 2017</b>	

Official Form 108

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-82033 Doc 1 Filed 08/29/17 Entered 08/29/17 10:32:13 Desc Main Document Page 49 of 56

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court Northern District of Illinois**

In	Jose L. Avila re Maria Avila		Case No	<b>.</b>	
	Maria Avria	Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation or	g of the petition in bankruptcy	, or agreed to be pa	id to me, for servi	
	For legal services, I have agreed to accept		\$	843.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$	843.00	
2.	\$ of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compe	ensation with any other persor	unless they are me	mbers and associa	ates of my law firm.
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name				my law firm. A
6.	In return for the above-disclosed fee, I have agreed to rer	nder legal service for all aspec	ets of the bankruptcy	case, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and render</li> <li>b. Preparation and filing of any petition, schedules, state</li> <li>c. Representation of the debtor at the meeting of creditor</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to regreaffirmation agreements and application</li> <li>522(f)(2)(A) for avoidance of liens on hour</li> </ul>	ment of affairs and plan whic rs and confirmation hearing, a educe to market value; ex ns as needed; preparation	h may be required; and any adjourned h	earings thereof;	and filing of
7.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.			ices, relief from	stay actions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any s bankruptcy proceeding.	agreement or arrangement fo	r payment to me for	representation of	the debtor(s) in
	August 29, 2017	/s/ Charles T. Se	well		
	Date	Charles T. Sewe			
		Signature of Attorn Charles T. Sewe			
		215 S. State Stre	et		
		Belvidere, IL 610 815-544-3118 F			
		charlests1@aol.			
		Name of law firm			

#### CHAPTER 7 BANKRUPTCY FEE AGREEMENT

- I, Jose L. Avila and Maria Avila, (hereinafter the "Clients"), hereby agree to retain the law firm of CHARLES T. SEWELL, with a principal place of business located at 215 South State Street, Belvidere, IL 61008 (hereinafter the "Firm"), in connection with his/her/our Chapter 7 Bankruptcy.
- 1. CONSIDERATION: In consideration for representing the Client in the above referenced matter, the Client agrees to compensate the Firm, Seven Hundred Dollars (\$700.00), for a single person filing and Eight Hundred Dollars (\$800.00) for a joint bankruptcy, which does not include any filing file fees, credit counseling or other costs associated with the case as described in Paragraph 3.
- 2. SCOPE OF REPRESENTATION: The Client agrees to and understands that the scope of legal services to be provided under this Fee Agreement shall be expressly limited to the following only:
- 1) Analysis of Client's financial situation;
- 2) Rendering legal advice to determine whether to file bankruptcy;
- 3) Whether commencing a case under Chapter 7, 11, 12, or 13 is appropriate
- 4) Advising the Client about the dischargeability and non-dischargeability of certain debts;
- 5) Exemption planning;
- 6) Negotiation of reaffirmation agreement with creditors;
- 7) Preparation and filing Chapter 7 bankruptcy petition including any applicable Schedules, Statement of Financial Affairs and Statement of Current Monthly Income and Means-Test Calculation;
- 8) Representing the Client at the 341 Meeting of Creditors; and
- 9) Responding to any informal request by the U.S. Trustee for additional documentation The above referenced fee shall only include the legal services specifically described above and nothing else. Additional fees apply if the Client fails to appear at any scheduled hearing with appropriate identification or fails to fully produce tax returns or documents. If the Client(s) desires the Firm to perform any work beyond what is specifically contracted for above (e.g. represent them in additional hearings, motions, amendments, challenges, objections, judicial lien avoidance, relief from the automatic stay, adversary proceedings, actions, audits etc., that could arise during the course of representation), the Client(s) must enter into a separate fee agreement with the Firm for that work. The Firm's refusal or failure to perform work beyond what was specifically contracted for in this Fee Agreement shall not be considered or be the basis (in whole or part) of any negligence or malpractice claim.
- 3. ADDITONAL COSTS: The following costs are not included in the above referenced fee: Filing Fee of \$335.00 for a Chapter 7, \$310.00 for a Chapter 13, Credit Counseling Costs, Expedited Preparation Fee, Appraisals, Broker Price Opinions ("BPOs"), Valuation Services, Credit Reports, Document Gathering Services (typically for deeds, child support orders, divorce decrees, law suits, etc.), Homesteads and Tax Transcripts.
- 4. PAYMENT: The Firm will begin working on Client's bankruptcy petition for \$400, but will not file the petition until the Firm has been paid in full along with any costs associated with the case. All payments under this Fee Agreement shall be made towards attorneys' fees first, then towards costs associated with the case, despite any designations Client may attempt to make when submitting payment(s).

CHAPTER 7 BANKRUPTCY FEE AGREEMENT Debtor(s): Jose L. Avila and Maria Avila, I/we are a federally designated Debt Relief Agency. We help people file for bankruptcy relief under the United States Bankruptcy Code. Page 1 of 3

- 5. CONFIDENTIALITY: The Firm will make every reasonable effort to ensure the confidentiality of Client's confidences and secrets. However, such information may be disclosed, if it is reasonably necessary to disclose as a part of the course of representation, required to disclose under law, court order, or subpoena, motion to withdrawal or necessary to resolve a fee dispute or malpractice claim.
- 6. CLIENT'S DUTY TO COOPERATE: Client must attend all scheduled meetings/hearings and reasonably cooperate with Firm requests. It is the Client's responsibility to provide the Firm with all the necessary documents and information to accurately prepare the petition. Upon request, Client must promptly furnish complete, detailed and accurate information to the Firm, including but not limited to, Bankruptcy Questionnaire, Credit Counseling Certificates, Deeds, Vehicle Valuations, Divorce Decrees, Child Support Orders, Social Security award letters, Income Tax Returns, Real Estate Tax Statements, Retirement Account Statements, Pay Check Stubs, Police & Accident Reports, Law Suits, Wage Garnishments, and Judgments. Client's failure to cooperate and/or provide documents and information is grounds for withdrawal. In return, the Firm agrees to keep you reasonably informed of the status of your case. Copies of important correspondence and documents will be provided to you.
- 7. WITHDRAWAL & DISCHARGE: The Firm reserves the right to withdraw from representation on the following grounds: the client's failure to pay the Firm under terms of this agreement; the Client's failure to cooperate with Firm requests; when a conflict of interest arises; or if the Client's conduct becomes illegal, unethical, or unreasonable. Any termination on the Firm's part will be consistent with the then application Rules of Professional Responsibility and reasonable notice will be given to the Client in order to protect his/her interests. If the Client no longer wishes to proceed with filing bankruptcy, discharges the Firm or the Firm withdrawals prior to the conclusion of this representation, the Firm is entitled to be compensated for the fair value of the services rendered to the Client up to the discharge or withdrawal, which could end up being nearly one hundred percent (100%) of the original fee depending on the amount of work performed.
- 8. JOINT & SEVERAL LIABLITY: Each Client that signs this fee agreement shall be jointly and severally liable for any outstanding balance owed to the Firm and for any collection and legal costs described in paragraph 9.
- 9. COLLECTION & LEGAL COSTS: In the event of any litigation, legal or collection action arising out of or from this Agreement, the prevailing party shall be entitled to recover from the non-prevailing party any and all attorneys' fees, time, costs, and expenses incurred in such litigation, legal or collection actions. The fact that no formal legal action or proceedings was actually taken or filed shall in no way limit the prevailing party's right to recover said legal or collection costs. The prevailing party shall be the party who recovers the greater relief whether equitable, injunctive, or damages in any action brought to enforce the party's rights under this Agreement. In the event an opposing party prevails on certain counterclaims or defenses, the recoverable attorneys' fees, time, costs, and expenses shall be reduced in proportion to the amount recovered on this Agreement less the amount received on the counterclaim.

The term "attorneys' fees, time, costs, and expenses" shall be given its most broadest meaning and specifically include (but in no way limited to), employing collection agencies, taking legal action against the defaulting party for breaching this Agreement, supplementary process, writ of attachments, copies, foreclosures, initiating criminal charges against the defaulting party (typically for "bad checks"), legal assistants time, administrative assistants time, law clerks time, expert witnesses, consultants, private investigators, waiting time, travel expenses, filing fees, court reporter fees, correspondence, telephone consultations, legal research, non-legal research, non-legal collection expenses or methods, preparation defending and litigating attorney fee and costs petitions or awards, trials, motions, appeals, mediation, arbitration and a like.

CHAPTER 7 BANKRUPTCY FEE AGREEMENT Debtor(s): Jose L. Avila and Maria Avila, I/we are a federally designated Debt Relief Agency. We help people file for bankruptcy relief under the United States Bankruptcy Code. Page 2of 3

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10 BINDING ON HEIRS: This fee agreement is binding upon the legal heirs, successors, legatees, distributes and personal representatives of the Client(s).

11 SEVERABLITY: If any provision or provisions of this Agreement shall be held to be invalid, illegal, unenforceable or in conflict with the law of any jurisdiction, all other provisions of this Agreement shall continue in full force and effect.

12 GOVERNING LAW: This Agreement shall be governed and construed according to the laws of the United States and the State of Indiana, without regard to the conflict of laws principals of any jurisdiction to the contrary.

13 FORUM SELECTION: Both the Client and the Firm agree that Boone County is a convenient and fair forum to litigate enforcement of this Agreement. Therefore, Boone County, Illinois shall be the sole forum, in which a party may bring a cause of action in state or federal court with respect to this Agreement. The parties irrevocably consent to the personal jurisdiction of the state and federal courts within the State of Illinois and waive all defenses to jurisdiction and objections to the propriety or convenience of these courts that they may have.

14 CLIENT ACKNOWLEDGEMENT: Client acknowledges that Charles T. Sewell or his agents have not made any guarantees of any kind regarding the outcome of your case, hearing, meeting of creditors, motion, arbitration, audit, return, petition, plan of reorganization, filing or settlement.

WARNING: THIS IS A LEGALLY BINDING CONTRACT WHICH RESTRICTS CERTAIN FREEDOM OF SUBSEQUENT ACTION OF THE CLIENT. IF NOT UNDERSTOOD, CLIENT SHOULD SEEK INDEPENDENT LEGAL COUNSEL. I/WE JOSE L. AVILA AND MARIA AVILA, HEREBY CERTIFY THAT I/WE HAVE READ THE ABOVE AGREEMENT AND UNDERSTAND AND AGREE TO ITS TERMS. I/WE ALSO HEREBY CERTIFY THAT I/WE RECEIVED A COPY OF THIS AGREEMENT.

Having read and understood the above Bankruptcy Fee Agreement, the Client and

the Firm executes this Agreement on the day of June, 2017

Signature of Attorney

Printed Name Printed Name

nature of Client Signature of Clie

CHAPTER 7 BANKRUPTCY FEE AGREEMENT Debtor(s): Jose L. Avila and Maria Avila, I/we are a federally designated Debt Relief Agency. We help people file for bankruptcy relief under the United States Bankruptcy Code. Page 3 of 3

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### United States Bankruptcy Court Northern District of Illinois

n re	Jose L. Avila Maria Avila		Case No.	
	- Maria / Wila	Debtor(s)	Chapter	7
	V	ERIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors: _	21
	The above-named Debtor(our) knowledge.	(s) hereby verifies that the list of credit	tors is true and	correct to the best of my
Date:	August 29, 2017	/s/ Jose L. Avila  Jose L. Avila  Signature of Debtor		
Date:	August 29, 2017	/s/ Maria Avila  Maria Avila		
		Signature of Debtor		

Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622

Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622

Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622

Atg Credit Llc 1700 W Cortland St Ste 2 Chicago, IL 60622

Chase Card Attn: Correspondence Dept Po Box 15298 Wilmington, DE 19850

Convergent Heathcare Recovery 121 Ne Jefferson St Suite 100 Peoria, IL 61602

Convergent Heathcare Recovery 121 Ne Jefferson St Suite 100 Peoria, IL 61602

Convergent Heathcare Recovery 121 Ne Jefferson St Suite 100 Peoria, IL 61602

Convergent Heathcare Recovery 121 Ne Jefferson St Suite 100 Peoria, IL 61602 Convergent Heathcare Recovery 121 Ne Jefferson St Suite 100 Peoria, IL 61602

Convergent Heathcare Recovery 121 Ne Jefferson St Suite 100 Peoria, IL 61602

Delta Dental P.O. Box 828 Stevens Point, WI 54481-0828

Frontier Communication 19 John St Middletown, NY 10940

Frontier Communication 19 John St Middletown, NY 10940

Mutual Mgmt 401 E State Rockford, IL 61104

Mutual Mgmt 401 E State Rockford, IL 61104

Rockford Mercantile 2502 S. Alpine Rd Rockford, IL 61108

Rockford Mercantile 2502 S. Alpine Rd Rockford, IL 61108

Rockford Mercantile 2502 S. Alpine Rd Rockford, IL 61108

Rockford Mercantile 2502 S. Alpine Rd Rockford, IL 61108 Tcf Banking & Savings 801 Marquette Ave Minneapolis, MN 55402